



## APPLICATION FOR RECORDS RETENTION SCHEDULE

Georgia Department of Labor  
Employment Security Agency  
Administrative Services Division  
Records Management and Controls

**INSTRUCTIONS:** The Records Management Officer of the Agency's Records Management and Controls Unit will be of assistance in completing this form. After Division Director/Designee has signed the form, forward original to Administrative Services Division, Records Management and Controls, 130 Memorial Drive, S. W., Atlanta, Georgia 30303. Attention: Records Management Officer

FOR AGENCY USE		FOR RECORDS MANAGEMENT USE	
Application Date	1. Agency Address Partial Claims Unit Unemployment Insurance Division Georgia Department of Labor 154 Washington Street Atlanta, GA 30334	Application Number <b>80-320</b>	
Application Number		Date Received JUL 24 1980	Date Completed AUG 28 1980
2. Person to Contact Frances Wilson		Working Title Supervisor	Telephone Number 656-2991
3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
4. Dates of Series Earliest 1974		5. Records Series Title (followed by title used in office, if different) current Partial Claims Records Files	
6. Division and Office Function What is the function of the Division and the Office in which this record series is created? The Unemployment Insurance Division determines employer liability, collects wage and tax reports, processes claims in accordance with the Georgia Employment Security Law, administers federal unemployment compensation program.  The partial claims unit certifies applicants, pays benefits, and maintains benefit records for workers who are under-employed but remain in the work force.			
7. Record Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.  Documents relating to: certification and payment of partial claims including UCFE(federal employees), UCFX (ex-servicemen), FSB (federal supplemental benefits, and SUA (supplemental unemployment assistance). Included are: The primary record is a computer printed 9 7/8"x 8 1/8" card folded over to create a file folder, the Claimant Record Card (ESA-805). The folder may include other forms drop-filed including: the Low Earnings Report (ESA-408) which initiates the 405, Transfer of Claim (ESA-416), Notice of Appeal (ESA-423), Notice to Base Period Employers of Claim Filed (ESA-419), Receipt of Payment on Overpayment Account (ESA-464), or a Separation Notice (ESA-800).  File is arranged: By the last four digits of the claimant's Social Security Number, thereunder alphabetically by surname			
8. Monthly Reference Rate One to six months old <u>100+</u> ; Seven to twelve months old <u>100+</u> ; Thirteen to twenty-four months old <u>25</u> ; twenty-five months and older <u>5 ?</u>			
9. Annual Rate of Accumulation of Records Letter-size drawers _____; Legal-size drawers _____ These records are housed in a box on _____ shelves _____; Other (specify) _____ accumulate at a rate of about 100-200 cubic feet per year depending on the condition of the economy. (Over)			

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
X		b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
X		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy. See R&A 14, Schedule #80-245
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
X		j. Does the record series result in a computer printout? MD030L: daily administrative summary totals of

11. Retention Requirements The following requires the series to be kept: new ESA-408's, housekeeping record

- |                          |              |                                   |                     |
|--------------------------|--------------|-----------------------------------|---------------------|
| a. State Law             | _____ years. | d. Audit period                   | <u>3 3/4</u> years. |
| b. Statute of limitation | _____ years. | e. Administrative need            | <u>3 3/4</u> years. |
| c. Federal Law           | _____ years. | f. Federal retention instructions | _____ years.        |

Attach copy or excerpt of laws or regulations. Explain administrative need.

12. Approved Disposition Instructions This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☐ Fiscal Year; ☒ Other benefit year end then.

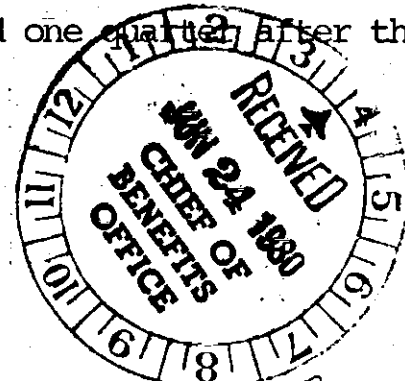
- ☒ Hold in the current files area 6 month(s) \_\_\_\_\_ year(s); then
- ☐ Transfer to local holding area; hold \_\_\_\_\_ year(s); then
- ☒ Transfer to State Records Center; hold 3 1/4 year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

The cycle of creation prevents a specific cut-off break. The file must be referenced by SSN. The records creating office cannot alter this or avoid some purging.

Retain state-funded partial claims two quarters after the end of the benefit year.

Retain federally funded partial claims for three years and one quarter after the end of the benefit year.

Retain until all audit questions are resolved.



These instructions apply to all prior and future accumulations of the series.

Division Director/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>Donald Brunsford</i>	7/8/80	<i>William B Johnson</i>	6/24/80
<i>Walter Brooks</i>	7/23/80	<i>Michael V. McKinley</i>	6/23/80
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	Date
		<i>State Auditor/Designee</i>	8-27-80
		<i>Secretary of State/Designee</i>	8-26-80
		<i>Attorney General/Designee</i>	8-28-80